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S. WARREN AUG 0 7 2017

COVER LETTER

TO:	Registration Sec Division of Corp			• 1 1
end te		ping & Land Care LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspor	ndence concerning this matter	to the following:	
		Kermit Rivera Cappas		
			Name of Person	
			Firm/Company	
		4906 18th Street W, Apt. B	3	
			Address	
		Bradenton, Florida 34207		
			City/State and Zip Code	
		amauris712@gmail.com		'
For furt	her information co	E-mail address: (i incerning this matter, please ca	to be used for future annual report not all:	flication)
Kermit	Rivera		941 526-9035	; 1
	Name of	Person		ne Telephone Number
Enclose	d is a check for the	c following amount:		
\$25	.00 Filing Fee (S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Divisior P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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pany as it now appears on our re l Liability Company)	cords.)
	•
bility company here:	
oility Company," the designation	"LLC" or the abbreviation "L.L.C."
4906 18th Street W	
Apartment B	
Bradenton, Florida 34207	
office address on our rec ere:	ords, enter the name of the nev
	 -
Entar Florida etraat a	dileave
	. Florida Zip Code
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e performance of my dutie	I further agree to comply with the s, and I am familiar with and 605, F.S. Or, if this document is n that the limited liability
	bility company here: bility Company," the designation office address on our recere: Enter Florida street and City City Enter to act in this capacity, the performance of my duties provided for in Chapter 6

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MBB	Hermit Rivera	4906 1841 St W Apt Brodenton, PC 3420	B to Add
		Brodenton, PC 3420	☐ Remove
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessity)	essary.)
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Effective date, if other than the date of filing:(opti	onal)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at 12:01 and The 90th day after the record is filed.	a.m. on the earlier of:
Dated July 31 .2017.	
Keunut Rucce Signature of a member or authorized representative of a member Hermit Rivero	17 AL
Hermit tivera Typed or printed name of signee	ώ ;=
t yped or printed name of signee	
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Page 3 of 3	3: 09